



CORPORATE DECLARATION



A Public Service Agency

OL NUMBER

DBA NUMBER

_____ (Corporate Name) declares that the following officers and/or directors are the only corporate members who participate in the direction, control and management of the affairs of the licensed entity in the State of California:

NAME	TITLE			EFFECTIVE DATE
	OFFICER	DIRECTOR	PRINCIPAL STOCKHOLDER	

_____ (Corporate Name) further authorizes the State of California, Department of Motor Vehicles, Licensing Operations Division, to remove the names of the following officers and/or directors who do not participate in the direction, control or management of the affairs of the licensed entity in the State of California from any previously submitted application for an occupational license, with the understanding that these officers and directors are not removed from the structure of the corporation:

NAME	TITLE			EFFECTIVE DATE
	OFFICER	DIRECTOR	PRINCIPAL STOCKHOLDER	

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and as Secretary of the corporation, that I am official custodian of the records of this corporation and have the authority to affix the corporate seal.

CORPORATE SEAL

X

SIGNATURE OF SECRETARY OF CORPORATION

DATE

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BUSINESS PHONE NUMBER





LIMITED LIABILITY COMPANY DECLARATION



A Public Service Agency

OL NUMBER

DBA NUMBER

____ (Limited Liability Company Name) declares that the following Members and/or Managers are the only Members or Managers participating in the direction, control and management of the affairs of the licensed entity in the State of California:

NAME	MEMBER	MANAGER	EFFECTIVE DATE

____ (Limited Liability Company Name) further authorizes the State of California, Department of Motor Vehicles, Licensing Operations Division, to remove the names of the following Members and/or Managers who do not participate in the direction, control and management of the affairs of the licensed entity in the State of California from any previously submitted application for an occupational license, with the understanding that these Members and Managers are not removed from the structure of the Limited Liability Company:

NAME	MEMBER	MANAGER	EFFECTIVE DATE

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that I am the official custodian of the records of this Limited Liability Company.

X

SIGNATURE

DATE

()

BUSINESS PHONE NUMBER



ASSOCIATION DECLARATION



A Public Service Agency

OL NUMBER

DBA NUMBER

_____ (Association) declares that the following Members and/or Managers are the only Members or Managers participating in the direction, control and management of the affairs of the licensed entity in the State of California:

NAME	MEMBER	MANAGER	EFFECTIVE DATE

_____ (Association) further authorizes the State of California, Department of Motor Vehicles, Licensing Operations Division, to remove the names of the following Members and/or Managers who do not participate in the direction, control and management of the affairs of the licensed entity in the State of California from any previously submitted application for an occupational license, with the understanding that these Members and Managers are not removed from the structure of the Association.

NAME	MEMBER	MANAGER	EFFECTIVE DATE

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that I am the official custodian of the records of the Association.

X

SIGNATURE

DATE

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BUSINESS PHONE NUMBER

